U.S. Deartment of Labor Office o abor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

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	For Official Use Only
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Name Myron

1. File Number U - 4992

3. Name and address of person filing.

E Moyano

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

1 / 1 / 2004 Through: 12 / 31 / 2004

Name Brotherhood of Locomotive Engineers & Trainmen

4. Name, file number, and address of labor organization.

Labor Organization File Number 012-015

P.O. Box, Bldg., Room No., if any		P.O. Box, Building and Roon	n Number, if any		
Street 12071 W Dakota D	r	Street 7793 S. Lafaye	ette Court		
City Lakewood		City Centennial			
State Colorado	ZIP Code + 4 80228-2935	State Colorado	ZIP Code + 4	80122-3016	
5. Position in labor organization.	Local Chairman of Division 94	0			
Enter appropriate data below If	f, during the past fiscal year, you or your spo (except as specified in the exclu	use or minor child directly or ind sions set forth in the instructions	irectly had any of the following int s):	erests	
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value <b>from an employer whose employees your organization represents</b> or is actively seeking to represent.					
6. Name and address of Employer (including trade name, if any).		7.a. Nature of Interest, Transa	ction, or Income.		
Name					
Trade Name, if any:		g g			
P.O. Box, Bldg., Room No., if any		7.b. Amount.			
		7.b. Amount.			
Street		7.D. Amound			
Street City		7.D. Amount			
	ZIP Code + 4	7.D. Alflouric			
City	Sigi	nature			
City State  15. Signature and verification		nature f Perjury and other applicable pe	illied by the sidilatory and is, to an	formation e best of the	

Nam of Person Filing Myron Moyano	File Number <b>U</b> -				
B. Held an interest in or derived income or economic benefit with monetary value <b>from a business</b> (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
8. Name and address of Business (including trade name, if any).	9. Business deals with:				
Name					
Trade Name, if any:	a. Labor Organization  b. Trust				
P.O. Box, Bldg., Room No., if any	c. Employer				
Street					
City					
State ZIP Code + 4					
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.				
Name					
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any					
Street	11.b. Approximate dollar value of such dealing.				
City	12.a. Nature of interest held or income received.				
State ZIP Code + 4					
	12.b. Amount.				
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.					
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.				
(including trade name, if any).  Name	Received from BLET Designated Legal Counsel (DLC) on 07/01/04, a meal. The cost of such meal has				
Trade Name, if any:	not been made known, but it is believed to have been in the vicinity of twenty-five dollars. (This was during our GCA Meeting.)				
P.O. Box, Bldg., Room No., if any					
Street	·				
City					
State ZIP Code + 4					
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment. \$25				